PATEN® APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  G110-040 CON														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
Ľ	OTAL CLAIMS	s ·	13					Έ	FEE	7	RATE	FEE	7	
F	OR		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FE	1	,	
Ţ	OTAL CHARGE	ABLE CLAIMS	/3 minus 20=		•		X\$ S	) <del>.</del>		OR	X\$18=	1	٦	
IN	DEPENDENT C	CLAIMS	3 minus 3 =		• .		X43		17	1	X86=		┪	
MULTIPLE DEPENDENT CLAIM PRESENT								9		OR		<del>                                     </del>	1	
• If the difference in column 1 is less than zero, enter "0" in column 2								i= 		OR	+290=	Ļ,	_	
سر	. 1.	TOTA	ar I		ÓR	TOTAL	770	4						
2	16.	(Column 1)				(Column 3)	SMA	LL E	NTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	-	
	Total	· 13	Minus	- 2	<i>9</i> 0	- (1)	X\$ 9			OR	X\$18=		1	
	Independent	· 3	Minus		<u> 5</u>	-9	X43=			OR	X86=		1	
_	PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /									OR	+290=		1	
11.27.00							+145: TOT ADDIT. FI	AL			. TOTAL		ł	
	(Column 1) (Column 2) (Column 3)									JOH A	ADDIT, FEE		1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	1	
	Total	. [7]	Minus	- 2	מ	- 1	X\$ 9=			OR	X\$18=		1	
	Independent	• 3	Minus	(j	3	-9	X43=	1	· .	OR	X86=		1	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=	十		-			ł	
•								<u>.</u>  -		OR	+290=	•	Į	
		(Caluma 4)					ADDIT FE		'لــــــــــــــــــــــــــــــــــــ	OR A	DON. FEE		ł	
,,	•	(Column 1) CLAIMS		(Column HIGHES		(Column 3)	· ·	_		-			1	
AMENDMENT C		REMAINING AFTER AMENDMENT.		PREVIOU PAID FO	SLY	PRESENT EXTRA	RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		2	X\$ 9=	T		OR	X\$18=			
	Independent		Minus	••• .		=	X43=	†		OR -	X86=		ŀ	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							†-		<b>~</b> }				
- 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									PL	+290=	· 		
	the Trighest Num	nber Previously Pai nber Previously Pai	d For IN THIS d For IN THIS	SPACE IS IN	ess than Bes than	20, enter '20."	ADDIT. FEI			_	TOTAL DOTT. FEE			
T	he Highest Numi	ber Previously Paid	For (Total or	Independent	) is the I	highest number f	ound in the a	ppro	priete box i	n cotu	70 1.		ĺ	

FORM PTO-875 (Rev. 10/00)

Peters and Tradement Office, U.S. DEPARTMENT OF COMMERCE